

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Jeff Thompson  
1956 Red Bird rd.  
Madison OH  
44057



9590 9402 8924 4064 8175 48

## 2. Article Number (Transfer from service label)

589 0710 5270 2361 1166 70

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X A. Kirby

☒ Agent☐ Addressee

## B. Received by (Printed Name)

Andrea Kirby

## C. Date of Delivery

5-21-25

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☒ No

## 3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

251 1898

Domestic Return Receipt

USPS TRACKING#



9590 9402 8924 4064 8175 48

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

Clerk, United States District Court  
Northern District of Ohio  
Carl B. Stokes Building  
901 Superior Ave  
Cleveland, OH 44113

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

3-152223

